

ISSUE SLIP STAPLE AREA (for additional cross references)

POSTED	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		15	2/20
FORMALITY REVIEW	NN	678	2/23/01
RESPONSE FORMALITY REVIEW	mm	780	5-9-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
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41	✓	✓	
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43	✓	✓	
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45	✓	✓	
46	✓	✓	
47	✓	✓	
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49	✓	✓	
50			

Claim	Final	Original	Date
51	✓	✓	
52	✓	✓	
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57	✓	✓	
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100			

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
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141	✓	✓	
142	✓	✓	
143	✓	✓	
144	✓	✓	
145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150			

If more than 150 claims or 10 actions
staple additional sheet here

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